

Final 1/102/20

502
DEP
2021

PERSONAL DECLARATION
OF ESTIMATED INCOME TAX



21502P099

YOUR SOCIAL SECURITY NUMBER (**Required**)

SPOUSE'S SOCIAL SECURITY NUMBER (**Required if applicable**)

1. Return by
2. Make checks payable to
COMPTROLLER OF MARYLAND - EST
3. DO NOT STAPLE PAYMENT TO FORM.
4. Using BLACK PEN print **AMOUNT OF
THIS PAYMENT** in field below.

\$